CENTER FOR DRUG EVALUATION AND RESEARCH

APPLICATION NUMBER: **63-165/s-3,s-5,s-6**

ADMINISTRATIVE DOCUMENTS

REVIEW OF PROFESSIONAL LABELING

Amendment to Supplement

FPL

DATE OF REVIEW: May 26, 1993

ANDA #: 63-165/S-006

NAME OF FIRM: Adria

Adriamycin PFS® NAME OF DRUG: Trade:

> Generic: Doxorubicin Hydrochloride Injection USP,

75 mg and 100 mg single dose vials.

DATE OF SUBMISSION: May 11, 1993

COMMENTS:

Container - For 75 mg and 100 mg: Satisfactory in FPL.

Carton - For 75 mg and 100 mg: Satisfactory in FPL.

Insert: Satisfactory in FPL.

However, at the time of next printing revise your package insert as described below. Revised labeling may be submitted with an annual report provided you describe the changes.

INDICATIONS AND USAGE, first sentence, revise to read -Α.

> ADRIAMYCIN PFS® (Doxorubicin HCl Injection USP) has been used...

WARNINGS В.

paragraph 2, third sentence -

cumulative [spelling]

2. paragraph 4, third sentence -

...1000/mm 3 ... [add "/"]

3. paragraph 8, first sentence -

> On intravenous administration of doxorubicin, extravasation...

[delete "HCl" and add comma]

C. REFERENCES

1. Revise reference #4 to read -

National Study Commission on Cytotoxic

Exposure - Recommendations for Handling
Cytotoxic Agents. Available from Louis P.
Jeffrey, ScD, Chairman, National Study
Commission on Cytotoxic Exposure,
Massachusetts College of Pharmacy and Allied
Health Sciences, 179 Longwood Avenue, Boston,
Massachusetts 02115.

2. Revise reference #7 to read -

American Society of Hospital Pharmacists Technical Assistance Bulletin on Handling Cytotoxic and Hazardous Drugs. Am J Hosp Pharm. 1990:47:1033-1049.

RECOMMENDATIONS:

- 1. Inform the firm of the above comments.
- 2. For the Record
 - a. In a 5/15/92 conversation, Dr Williams (HFD-150) confirmed the 75 mg vial was acceptable.
 - b. The last sentence in the first paragraph of the WARNINGS section was found to be acceptable in a 6/22/92 NA letter to the firm. The wording was confirmed by Ellen Cutler (HFD-150) in a 5/27/93 memo.

John Grace

ul 6/1/93

REVIEW OF PROFESSIONAL LABELING

Supplement

DRAFT - FPL

DATE OF REVIEW: 5/14/92

AADA #: 63-165/S-00

NAME OF FIRM: Adria

NAME OF DRUG:

Trade:

Generic: Adriamycin PFS® (Doxorubicin

Hydrochloride Injection USP) 75 mg

and 100 mg single dose vials

DATE OF SUBMISSION: 3/28/91

COMMENTS:

Container: Satisfactory in draft for 75 mg and

100 mg, however we prefer "STERILE ISOTONIC SOLUTION" (rather than just

"STERILE")

Carton: Satisfactory in draft for 75 mg and 100 mg

Insert: Not Satisfactory

A. Title

Relocate "USP" to appear at the end of the established name: Doxorubicin Hydrochloride Injection USP.

.....

B. DESCRIPTION

paragraph 1, second sentence, revise to read:

Doxorubicin consists of a napthacenequinone...

2. paragraph 3, add:

 $37.5 \ \text{mL} \ (75 \ \text{mg}) \ \text{and} \ 50 \ \text{mL} \ (100 \ \text{mg}) \ \text{single dose}$

3. The requirements of 21 CFR 201.57(a)(1)(ii) and (iv) must be met. We believe the route should be more specific than "parenteral". C. CLINICAL PHARMACOLOGY, paragraph 2

We prefer (to rather than hyphen)

40% to 50% 4% to 5%

D. WARNINGS

paragraph 1, fourth sentence, revise to read:

...into account previous or... (delete "a")

- 2. paragraph 4, first sentence we prefer:
 ...10 to 14 days...
- E. PRECAUTIONS, paragraph 3 we prefer:
 ...1 to 2 days...
- F. ADVERSE REACTIONS, Gastrointestinal, first and second sentences revise to read:

...5 to 10 days..

The dosage regimen consisting...

- G. DOSAGE AND ADMINISTRATION
 - 1. Paragraph 2
 - The most commonly used dosage schedule is 60 to 75 mg/m²...
 - b) third sentence revise to read:
 An alternative dosage schedule is...
 - c) fourth sentence revise to read:
 Thirty (30) mg/m²...
 - d) final sentence we prefer:
 ... 1.2 to 3.0 mg/dL...

2. paragraph 4 - revise to read:

> ...with heparin or fluorouracil... (delete 5)

Add as paragraph 3: 3.

> Parenteral drug products should be inspected visually for particulate matter and discoloration prior to administration, whenever solution and container permit.

HOW SUPPLIED н.

1. single dose vials, storage statement, revise to read:

> 2°-8°C (36°-46°F). Protect from light...

single dose vials. 2.

> Move "Discard" statement to the next line.

multiple dose vials, storage statement, 3. revise to read:

> 2°-8°C (36°-48°F). Protect from light and retain in carton until contents are used.

I. REFERENCES

Update reference #7 to read:

... Am J Hosp. Pharm. 1990; 47:1033-1049.

RECOMMENDATIONS:

- 1. Inform the firm of the above comments.
- Request the firm revise their container labels, and carton and insert labeling, then prepare and submit final printed labels and labeling.

 The Muse 5/19/9-2

MEMORANDUM

DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC HEALTH SERVICE FOOD AND DRUG ADMINISTRATION CENTER FOR DRUG EVALUATION AND RESEARCH

DATE:

September 25, 1992 Mulladeron

FROM:

Mark Anderson, CSO, Branch 5

SUBJECT:

AADA 63-165/S-00 β and S-00 β 5

TO:

The record

John Harrison, Eric Duffy, Ph.D. and I spoke with Fred Grab in follow-up to the 9/21/92 conversation I had with Mr. Grab. After discussion, it was clarified that in order to gain approval of S-003 and S-003 Adria will need to prepare a test batch of at least 10% of the proposed maximum batch size which may be split filledinto 75 mg and 100 mg vials. Ninety day accelerated stability data gathered prior to submission of the amendments to S-003 and S-003 will also be required.

M E M O R A N D U M

DEPARTMENT OF HEALTH AND HUMAN SERVICES
PUBLIC HEALTH SERVICE
FOOD AND DRUG ADMINISTRATION
CENTER FOR DRUG EVALUATION AND RESEARCH

DATE:

September 21, 1992

FROM:

Mark Anderson, CSO

SUBJECT:

AADA 63-165/S-003 and S-005 Requests by Adria to

reconsider our 5/27/92 NA letters

TO:

The record

I called Fred Grab, Adria Labs [(614) 764-8128] about his pending requests dated July 20, 1992 for meetings to discuss the not approvable letters Adria received for S-003 (which provides for additional dosage strengths of 75 and 100 mg/vial of Adriamycin PFS) and S-005 (which provides for use of a continuous processing vial preparation, filling, capping and exterior vial rinsing line to replace the manual line now in use). The Adria letters take exception to our reasons for not approving the supplements and request the above mentioned meetings if we do not agree with their proposals.

I told Mr. Grab that after internal discussion, we did not feel a meeting(s) would serve a useful purpose. However it was suggested that we instead have a conference call with Mr. Harrison, Dr. Duffy and Adria to clarify our position.

Mr. Grab said Adria is still especially concerned with the need to submit stability data and batch records for the 75 mg and 100 mg strengths prior to approval due to the expense of the raw materials and the possibility the products may expire prior to approval. He referred to discussions which he said were held between Mr. Harrison (and possibly others) and Mr. Warren Myers of Adria in November 1988 which was prior to submission of Adria's AADA 63-165 in January of 1989. It was and is Adria's understanding from that meeting that agreement was reached to permit intermediate fill sizes to be manufactured based on stability data generated on the largest and smallest fill sizes.

After checking, I told Mr. Grab I was unable to locate any November 1988 meeting minutes but that even if agreement was reached at that time that our policies are subject to change and that, as Dr. Duffy had previously explained (refer to 9/2/92 T. Con.), manufacture of one batch of each strength is necessary prior to approval. This is a policy we apply to all applicants.

Page. 2

Mr. Grab then asked if it would be possible to review other aspects of the supplements and resolve deficiencies such that they could be found approvable except for submission of stability data and batch records for the 75 and 100 mg fill sizes as a means of minimizing the possibility of product expiring before approval. I said I would relay this request to Mr. Harrison.

REVIEW OF PROFESSIONAL LABELING

Amendment to Supplement

NO LABELING SUBMITTED

DATE OF REVIEW: August 6, 1992

AADA #: 63-165/S-006 (New Correspondence)

NAME OF FIRM: Adira

NAME OF DRUG: Trade: Adriamycin PFS

Generic: Doxorubicin Hydrochloride Injection, USP

DATE OF SUBMISSION: July 20, 1992

COMMENTS:

We acknowledge the firm's commitment to submit final printed. labeling as soon as the Division of Oncology/Pulmonary Drug Products approves the two NDA's associated with this product.

RECOMMENDATIONS:

1. Inform the firm of the above comments.

J.Grace

FINAL

ノリル

DEPARTMENT OF HEALTH AND HUMAN SERVICES Public Health Service FOOD AND DRUG ADMINISTRATION

ESTABLISHMENT EVALUATION REQUEST

AEQUEST TYPE (Check One) IX Original	DATE 5/2	4/93 PHONE N 295-8		=5 (3.7,	
REQUESTOR'S NAME Eric Duffy/Jena Weber		DIVISION		MAIL CO	DDE - 635
APPLICATION AND SUPPLEMENT NUMBER 63-165/S-005					
BRAND NAME		ESTABLISHED NAME	= = = = = = = = = = = = = = = = = = =		
Adriamycin PFS		Doxorubicin	HCl Injection	m, USP	
DOSAGE AND STRENGTH 10. 20. 50. 200 mg/vial				STERILE	
PROFILE CLASS SVS	PRIORI	TY CLASSIFICATION	(See SMG CDER-48		.
APPLICANT'S NAME Adria Laboratories	l -				
ADDRESS					· · · · · · · · · · · · · · · · · · ·
7001 Post Road Dublin, OH					,
COMMENTS			 		;
		•	•		
		·			Ť

FACILITIES TO BE EVALUATED			DMF NUMBER/	F KEY/	
FACILITIES TO BE EVALUATED (Name and Complete Address)	=======================================	RESPONSIBILITY	PROFILE CODE		HFD-224 USE ONEY
(Name and Complete Address) 1. Adria SP, Inc.		RESPONSIBILITY Manufacturing Testing	PROFILE CODE		HEDSON USE ONEY.
(Name and Complete Address) 1. Adria SP, Inc. 2272 Balloon Park Rd. Alburquerque, NM \$7109		Manufacturing	PROFILE CODE		HED SECURE ONEY.
(Name and Complete Address) 1. Adria SP, Inc. 2272 Balloon Park Rd. Alburquerque, NM \$7109		Manufacturing	PROFILE CODE		GFO SYCUSEONEY
(Name and Complete Address) 1. Adria SP, Inc. 2272 Balloon Park Rd. Alburquerque, NM 87109		Manufacturing	PROFILE CODE		HFD-SZEUSEONEY.
(Name and Complete Address) 1. Adria SP, Inc. 2272 Balloon Park Rd. Alburquerque, NM \$7109		Manufacturing	PROFILE CODE		HFD-SZEUSEONEY.
(Name and Complete Address) 1. Adria SP, Inc. 2272 Balloon Park Rd. Alburquerque, NM \$7109 2. Continuous process Room 274		Manufacturing	PROFILE CODE		HFD SZEUSEONEY.
(Name and Complete Address) 1. Adria SP, Inc. 2272 Balloon Park Rd. Alburquerque, NM \$7109 2. Continuous process Room 274		Manufacturing	PROFILE CODE		GFO SZEUSEONEY
Name and Complete Address) 1 Adria SP, Inc. 2272 Balloon Park Rd. Alburquerque, NM \$7109 2 Conflination process Room 274 3.		Manufacturing	PROFILE CODE		SIFO SZEUSEONEY
(Name and Complete Address) 1 Adria SP, Inc. 2272 Balloon Park Rd. Alburquerque, NM \$7109 2 Conflination process Room 274 3.		Manufacturing	PROFILE CODE		GFO-SZEUSEONEY
(Name and Complete Address) 1 Adria SP, Inc. 2272 Balloon Park Rd. Alburquerque, NM \$7109 2 Conflinacus process Room 274 3.		Manufacturing	PROFILE CODE		AFFO SZEUSEONEY.
(Name and Complete Address) 1. Addria SP, Inc. 2272 Balloon Park Rd. Alburquerque, NM 87109 2. Conflinacus process Room 274 3. 4.		Manufacturing	PROFILE CODE	CIRTS ID	AFFO SZEUSEONEY
(Name and Complete Address) 1. Addria SP, Inc. 2272 Balloon Park Rd. Alburquerque, NM 87109 2. Conflinacus process Room 274 3. 4. FOR HFD-324 CSO		Manufacturing	PROFILE CODE	CIRTS ID	EFFO SZEUSEONEY
Name and Complete Address) 1 Addria SP, Inc. 2272 Balloon Park Rd. Alburquerque, NM \$7109 2 Conflinacus process Room 274 3. 4.		Manufacturing	PROFILE CODE	CIRTS ID	EFFO SZCUSE ONEY

RECORD OF TELEPHONE CONVERSATION/MEETING	5/15/92
	NDA NUMBER
I spoke with Dr Williams	G 3-165
In The acceptations of	IND NUMBER
75 mg small doce was.	TELECON/MEETING
Ho liteled to so OR!	INITIATED BY MADE
and the or singular	SPONSOR PHONE
2) already have 50 mg + 100 mg	adrianycin PFS
	FIRM NAME
I spoke with ollen cutter	
1 1 7 The 3/3 7/9/ NICO MARCON 12	adria
1 - 1/1/42 50 76/	NAME AND TITLE OF PERSON WITH WHOM CONVERSATION WAS HELD
λ	D. Williams
combined insert we	- FPA Onerlogy medical officer
approve the supplements we have until they approve	Ellen Cutter on onedogy TELEPHONE NO.
have until they app still not theirs. Clien said still not	·
1 ' I confirmed war	443-5/97
she had received a copy	`.
of the review we sent	
over.	
SIGNATURE	STATE OF THE PARTY
Mana Mill FORM FD 2587 (11/77)	office of Generic Drugs
1 Onin 10 2367 (1777)	ORIGINAL IND/NDA



Memorandum Memorandum

Sterile Product X Non Sterile Product Application and Supplement No. 63-165/S-004 Brand Name (if any) ADRIAMYCIN PFS Establishment Name, Dosage Form and Strength Doxorubicin Hydrochloride Injection USP Profile Class Code: SVP Priority Classification: (See SMG BD-482 Applicant's Name: Adria Laboratories Address: 7001 Post Rd., Dublin, OH 43017 Facilities to be Evaluated: (Name, full Address, DMF No., and responsibility) Adria SP 4272 Balloon Park Rd. Alburquerque, NM QC testing, labeling packaging 3. QC testing, labeling, packaging 3. Other Information or Special Requests: For HFD-320 Use Only: Date Received: 5/21/92 Date Received: 5/21/92	te Ma	ay 20, 1992			
Division of Manufacturing & Product Quality (HFD-320) Sterile Product X Non Sterile Product Application and Supplement No. 63-165/S-004 Brand Name (If any) ADRIAMYCIN PFS Establishment Name, Dosage Form and Strength Doxorubicin Hydrochloride Injection USP Profile Class Code: SVP Priority Classification: (See SMG BD-482 Applicant's Name: Adria Laboratories Address: 7001 Post Rd., Dublin, OH 43017 Facilities to be Evaluated: (Name, full Address, DMF No., and responsibility) Adria SP 4272 Balloon Park Rd. Alburquerque, NM Adria SP 4272 Balloon Park Rd. Alburquerque, NM QC testing, labeling packaging 3. 4. 5. Other Information or Special Requests: For HFD-320 Use Only: Date Received: 5/21/92 Date Received: 5/21/92	om	Division of Generic Drugs 5	HFD-	632	
Sterile Product X Non Sterile Product Application and Supplement No. 63-165/S-004 Brand Name (If any) ADRIAMYCIN PFS Establishment Name, Dosage Form and Strength Doxorubicin Hydrochloride Injection USP Profile Class Code: SVP Priority Classification: (See SMG BD-482 Applicant's Name: Adria Laboratories Address: 7001 Post Rd., Dublin, OH 43017 Facilities to be Evaluated: (Name, full Address, DMF No., and responsibility) Adria SF 4272 Balloon Park Rd. Alburquerque, NM QC testing, labeling packaging Adria SP 3700 Osuna Drive Sutte 715 Albuquerque, NM QC testing, labeling, packaging Cother Information or Special Requests: Date Received: 5/24/92 Date Received: 5/24/92	·. ,	Requestor's NameEric Duffy/Dave Doleski	Phone	295-8360	
Sterile Product X Non Sterile Product Application and Supplement No. 63-165/S-004 Brand Name (if any) ADRIAMYCIN PFS Establishment Name, Dosage Form and Strength Doxorubicin Hydrochloride Injection USP Profile Class Code: SVP Priority Classification: (See SMG BD 482 Applicant's Name: Adria Laboratories Address: 7001 Post Rd., Dublin, OH 43017 Facilities to be Evaluated: (Name, full Address, DMF No., and responsibility) For HFD 320 Use Stans & Date of Inspection Adria SP 4272 Balloon Park Rd. Alburquerque, NM QC testing, labeling packaging 3. QC testing, labeling, packaging 3. Other Information or Special Requests: For HFD-320 Use Only: Date Received: 5 2 9 9	ubject	ESTABLISHMENT EVALUATION REQUEST		÷	
Application and Supplement No. 63-165/S-004 Brand Name (if any) ADRIAMYCIN PFS Establishment Name, Dosage Form and Strength Doxorubicin Hydrochloride Injection USP Profile Class Code: SVP Priority Classification: (See SMG BD 482 Applicant's Name: Adria Laboratories Address: 7001 Post Rd., Dublin, OH 43017 Facilities to be Evaluated: (Name, full Address, DMF No., and responsibility) For HFD 320 Use Stanus & Date of Inspection AC Lesting, labeling packaging QC Lesting, labeling, packaging 4. QC testing, labeling, packaging 4. Date Received: 5/21/92 For HFD-320 Use Only: Date Received: 5/21/92	o ··· :	Division of Manufacturing & Product Quality (HFD-320)			
Application and Supplement No. 63-165/S-004 Brand Name (if any) ADRIAMYCIN PFS Establishment Name, Dosage Form and Strength Doxorubicin Hydrochloride Injection USP Profile Class Code: SVP Priority Classification: (See SMG BD 482 Applicant's Name: Adria Laboratories Address: 7001 Post Rd., Dublin, OH 43017 Facilities to be Evaluated: (Name, full Address, DMF No., and responsibility) For HFD 320 Use Stanus & Date of Inspection Adria SF 4272 Balloon Park Rd. Alburquerque, NM QC Lesting, labeling packaging QC testing, labeling, packaging 3. Other Information or Special Requests: Date Received: 5/2/92 Date Received: 5/2/92		Sterile Product X Non Sterile Pro	oduct		
Brand Name (if any) ADRIAMYCIN PFS Establishment Name, Dosage Form and Strength Doxorubicin Hydrochloride Injection USP Profile Class Code: SVP Priority Classification: (See SMG BD-482 Applicant's Name: Adria Laboratories Address: 7001 Post Rd., Dublin, OH 43017 Facilities to be Evaluated: (Name, full Address, DMF No., and responsibility) For HFD 320 Use Status & Date of Inspection Adria SP 4272 Balloon Park Rd. Alburquerque, NM QC testing, labeling packaging 3. QC testing, labeling, packaging 3. Other Information or Special Requests: For HFD-320 Use Only: Date Received: 5/21/92	•				
Priority Classification: Adria Laboratories Address: Address: Address: Address, Dublin, OH 43017 Facilities to be Evaluated: (Name, full Address, DMF No., and responsibility) Adria SP 4272 Balloon Park Rd. Alburquerque, NM QC testing, labeling packaging 2. Adria SP 3700 Osuna Drive Suite 715 Albuquerque, NM QC testing, labeling, packaging 3. 4. 5. Other Information or Special Requests: Date Received: Date Received: Date Received: Date Received: Date Received:					
Priority Classification: Applicant's Name: Adria Laboratories Address: 7001 Post Rd., Dublin, OH 43017 Facilities to be Evaluated: (Name, full Address, DMF No., and responsibility) Adria SP 4272 Balloon Park Rd. Alburquerque, NM QC testing, labeling packaging 2 Adria SP 3700 Osuna Drive Suite 715 Albuquerque, NM QC testing, labeling, packaging 3. 4. 5. Other Information or Special Requests: Date Received: 5/21/92 Date Received: 5/21/92		Establishment Name, Dosage Form and Strength Doxorubicin I	lydrochlo	ride Inject	ion USP
Address: Address: Address Address, Dublin, OH 43017 Facilities to be Evaluated: (Name, full Address, DMF No., and responsibility) Addria SP 4272 Balloon Park Rd. Alburquerque, NM QC testing, labeling packaging 2 Addria SP 3700 Osuna Drive Suite 715 Albuquerque, NM QC testing, labeling, packaging 3. 4. 5. Other Information or Special Requests: Date Received: 5/2/92 Date Received: 5/2/92		Profile Class	s Code:	SVP	
Facilities to be Evaluated: (Name, full Address, DMF No., and responsibility) For HFD 320 Use Stanus & Date of Inspection Adria SP 4272 Balloon Park Rd. Alburquerque, NM QC testing, labeling packaging QC testing, labeling, packaging 3. 4. 5. Other Information or Special Requests: Date Received: 5/21/92		Priority Classification:		(See S	SMG BD-4820.3
Facilities to be Evaluated: (Name, full Address, DMF No., and responsibility) For HFD 320 Use Status & Date of Inspection Adria SP 4272 Balloon Park Rd. Alburquerque, NM QC testing, labeling packaging QC testing, labeling, packaging 3. Other Information or Special Requests: Date Received: 5/21/92		Applicant's Name: Adria Laboratories			<u>.</u>
2 Adria SP 3700 Osuna Drive Suite 715 Albuquerque, NM QC testing, labeling, packaging 3. 4. 5. Other Information or Special Requests: For HFD-320 Use Only: Date Received: 5/21/92	~~ 	Facilities to be Evaluated: (Name, full Address, DMF No., and response			
Other Information or Special Requests: For HFD-320 Use Only: Date Received: 5/2/92	<i>aan</i> aaf P	2. Adria SP 3700 Osuna Drive Suite 715 Albuquerqu QC testing, labeling, packaging		1c-2/21/	192
For HFD-320 Use Only: Date Received: 5/2//92	:	4			
Anna All	·	Other Information or Special Requests:	·		
Anna All		*************	******	*************	******
Man alleld		For HFD-320 Use Only: Date Receiv	ed:	21/92	
MINUL		CGMP Compliance Status of Facilities Evaluated:	M	(12. 100	
CSO: Date Completed:		<i>'</i>	leted:3	12000	

Original and First Copy: HFD-320 Remaining Copies: Requesting Office Use



MEMORANDUM

DEPARTMENT OF HEALTH AND HUMAN SERVICES
PUBLIC HEALTH SERVICE
FOOD AND DRUG ADMINISTRATION
CENTER FOR DRUG EVALUATION AND RESEARCH

DATE:

November 12, 1992 Mark Chileron

FROM:

Mark Anderson, CSO, Branch 5

SUBJECT:

AADA 63-165/S-007 for Doxorubicin HCl Inj. by Adria

Request for Expedited Review

TO:

The Record

I called Mr. Fred Grab, Regulatory Affairs at Adria [6140 764-\$128] and informed him that his request for expedited review for the supplement dated November 3, 1992 has been denied. I explained that economic hardship, other than that caused by events outside the applicant's control, was not a grounds for granting expedited review.

Mr. Grab thanked me for the information and, although not in agreement, said he was not surprised as to our decision. He asked for an estimate as to how long it might be before the supplement was reviewed. I said, based on current workloads, it appeared the supplement would be reviewed within about 4 months - though I offered no assurance of this.

The conversation ended cordially.

--

OFFICE OF GENERIC DRUGS

ANDA/AADA SUPPLEMENT #: SC-007 APPLICANT: Advice Caboratories

AMDA/AADA SUPPLEMENT #: 50-007 APPLICANT:

DRUG: Doxorubicin HCI Injection

DATE OF SUBMISSION: 11 3 97_

The Office of Generic Drugs Policy and Procedure Guide #18-90 as revised on January 22, 1992 lists the following criteria for granting expedited review status to a supplemental new drug application. At least one of the criteria must be met.

- PUBLIC HEALTH NEED. Events that affect the availability of a drug 1. for which there is no alternative.
- EXTRAORDINARY HARDSHIP ON THE APPLICANT.
 - Catastrophic events such as explosion, fire, storm damage.
 - Events that could not have been reasonably foreseen, and for b. which the applicant could not plan. Examples include:
 - abrupt discontinuation of supply of active ingredient, packaging material, or container closure; and
 - relocation of a facility or change in an existing facility because of a catastrophic event (see item 2.a.).

3. AGENCY NEED.

- Matters regarding the government's drug purchase program, upon request from the appropriate FDA office.
- Federal or state legal/regulatory actions, including b. mandated formulation changes or labeling changes if it is in the Agency's best interest.
- c. Expiration-date extension or packaging change when the drug product is the subject of a government contract award.

RECOMMENDATIONS:		Mark Ond	eron	11/9/92
Branch CSO/Chemist Grant	Deny	Signatures & Dat	es	
Supervisory Chemist's Grant	E. Duff	1/10/92		•,
Supervisory Chemist Grant	Deny	Signature & Date	9	
C Luca Har	_	11/10/92		
Division Director Grant	Deny	Signature & Date	e	/
<u> </u>	Local	int met a no of	The policy	landship, u
Division Director Grant COMMENTS: While there m	ay be	economic h	andship	involved
our policy + Procedure Guis	1 Le # 18	: 90 does ne	the t	-" this
our policy + Procedure Gui type of situation and a fublic health need.	applican	t has not c	aimed a	~
Public health need.	′ /			